

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000149705

**Entity Name:** SERVICIOS DYR LLC

**Current Principal Place of Business:**

417 NE 3RD SVE  
APT 1  
HALLANDALE, FL 33009

**Current Mailing Address:**

417 NE 3RD SVE  
APT 1  
HALLANDALE, FL 33009 US

**FEI Number:** 35-2755622

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

ANGEL PEREZ, MIGUEL  
417 NE 3RD AVE #1  
HALLANDALE, FL 33009 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name PEREZ, MIGUEL  
Address 417 NE 3RD AVE #1  
City-State-Zip: HALLANDALE FL 33009

Title MGR  
Name LOPEZ VALLESTER, DUSBEL K  
Address SANTIAGO DEL ESTERO 444  
City-State-Zip: CIUDAD DE BUENOS AIRES 1075

Title AMBR  
Name LAGOS URIBE, ROBERT JOSE  
Address SANTIAGO DEL ESTERO 444  
City-State-Zip: CIUDAD DE BUENOS AIRES 1075

Title AMBR  
Name LOPEZ VALLESTER, DUSBEL K  
Address SANTIAGO DEL ESTERO 444  
City-State-Zip: CIUDAD DE BUENOS AIRES 1075

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** MIGUEL ANGEL PEREZ

**MANAGER**

**04/29/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date